Testimony in Support of HB-7395 "An Act Concerning Opioid Abuse and Treatment"

April 2, 2019

To Senator Winfield, Representative Stafstrom, and the Distinguished Members of the Judiciary Committee:

My name is Asadullah Awan, and I am a physician that works in the Addiction and Recovery Clinic at Yale New Haven Hospital. I am writing to express strong support for HB-7395, not just as a physician that works with opioid use disorder, but as a concerned resident of Connecticut.

In 2017, more than 1,000 Connecticut residents died from an opioid overdose, almost 3 per day. More than half of those overdoses occurred among formerly incarcerated people, who are 8 to 11 times more likely to overdose in the first few weeks after their release. Yet most state prisoners have no access to medication-assisted treatment (MAT) for opioid use disorder (i.e. buprenorphine and methadone). Likewise, there is minimal assistance in transitioning these individuals safely into community resources for opioid addiction.

Currently, if a someone with an opioid use disorder is taken to prison, they are forced to withdraw painfully behind bars. In many prisons, even if someone is already on MAT and have finally regained stability in their life, they are unable to continue their medication. This leads to an inevitable relapse either in prison or upon release. It should come as no surprise that quitting "cold-turkey" is not effective for dealing with chronic addiction.

Other states that have adopted similar policies to HB-7395 benefited from a **60% reduction in death in recently incarcerated people**. In addition to saving the lives of our neighbors, other benefits potentially include hospital savings from managing less opioid intoxication and overdose, decreasing desperate criminal activity to obtain opioids, and cutting the expense of re-imprisonment for these crimes.

As both an inpatient and outpatient provider, I have seen the spectrum of opioid use disorder and the extent to which it can devastate lives. I am still haunted by the scene of a young patient who had overdosed, being rolled down to have their organs harvested. Behind them, two parents were crying uncontrollably and thanking the doctors for doing all they could. On the other hand, I am constantly humbled by the patients in my clinic who have overcome their opioid use disorder and have reconnected with their families and their communities. This is all possible because of medication-assisted therapy, the national standard of treatment for opioid use disorder.

We would not withhold lifesaving heart or stroke medications, so how can we be ok with withholding this lifesaving medication? All of our state prisons must provide high quality and evidence-driven healthcare, including access to MAT. It is with my medical expertise as a

physician and my concern as a Connecticut resident that I urge the committee to approve HB-7395 out of the committee.

Thank you for your time and your consideration.

Sincerely,

Asadullah Awan, MD, MPHPhysician, Yale New Haven Hospital